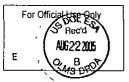
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 01685	2. Fiscal Year Covered From:				
Lancard Lancard	[1]/[1]/2004  Through: 12·/31 / 2004				
Name and address of person filing.	Name, file number, and address of labor organization.				
Name Al R Mixon	Name Teamsters Local Union No. 507				
The state of the s	Labor Organization File Number 1064-048				
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any,				
Street 940 Chinaberry Circle South	Street 5425 Warner Rd., #7				
City !Macedonia	City (Cleveland				
State   Ohio   ZIP Code + 4   44056	State Ohio ZIP Code + 4 44125				
5. Position in labor organization. Principal Officer					
ETINOSpot Officer					
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):					
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati					
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.				
Name	1				
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any	7.b. Amount.				
Street					
City	·				
State ZIP Code + 4	L				
Citato (					
Sign  15. Signature and verification. The undersigned declares, under penalty of	Parium and other applicable penalties of the law, that all of the information				
	ring documents), has been examined by the signatory and is, to the best of the				
Signed Ol R. Milyan	On 8/13/2005 216-328-0111				
	Date Telephone Number				

Name of Person Filing Al Mixon	Name of	Person	Filing	A1	Mixon
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File Number U- 01685

# Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Faulkner, Muskovitz & Phillips	ि a. Labor Organization
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust
Street 820 W. Superior Ave., Ninth Floor	c. Employer
City Cleveland	
State Ohio	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Teamsters Local Union No. 507	Legal counsel for Union
Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 5425 Warner Rd., #7  City Cleveland	
State Ohio ZIP Code + 4 44125	11.b. Approximate dollar value of such dealing. \$185,315
	12.a. Nature of interest held or income received. Christmas gift 12/20/2004
	12.b. Amount. \$200

3/13/05

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Name of Person Filling Al Mixon

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# Part B Continuation Page

B. Held an Interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name   Neal Wainblatt, attorney	a. Labor Organization
Trade Name, If any: Duvin Cahn & Hutton	b. Trust
P.O. Box, Bidg., Room No., if any Erieview Tower	c. Employer
Street 1301 East Ninth St.	him'
City Cleveland State Ohio ZIP Code + 4 44114	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Cleveland Bakers and Teamsters P, HW Punds	Legal counsel for Trust Funds
Trade Name, if any:	
P.O. Box, Bldg., Room No., If any	
Street 1870 E. 19th St.	
City Cleveland	
State Ohio ZIP Code + 4 44114	11.b. Approximate dollar value of such dealing. \$69,776
	12.a. Nature of interest held or income received.
	Attendance at event on 4/10/04
	12.b. Amount. \$405

3/13/05

Name of Person Filing Al Mixon	File Number U- 01685
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise
8. Name and address of Business (including trade name, if any).  Name Bakers Local Union No. 19  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 1870 E. 19th St.  City Cleveland  State Ohio ZIP Code + 4 441.14	9. Business deals with:    X   a. Labor Organization     b. Trust     c. Employer
40 MO h == 0 = in the stand mine threat as a male year in a comp	11.a. Nature of such dealing.
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Teamsters Local Union No. 507  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	Serve as Trustee on Taft-Hartley trust fund
Street 5425 Warner Rd., #7	11.b. Approximate dollar value of such dealing. \$0
City Cleveland	12.a. Nature of interest held or income received.
State Ohio ZIP Code + 4 441.25 ;	Christmas gift on 12/20/2004
	12.b. Amount. \$40
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of mone	ler parts A and B above) y or other thing of value.
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street [	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.
Form LM-30 (2003)	

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Name of Person Filing Al Mixor	n	File Number U-	01685	

# Part B Continuation Page

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8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Cleveland Bakers and Teamsters P, HW Funds	(▼) a. Labor Organization
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust
Street 1870 E. 19th St.	c. Employer
	Land
State Ohio ZIP Code + 4 44 114	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Teamsters Local Union No. 507	Union trustee as a member of Teamsters Local Union No. 507
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street,5425 Warner Rd., #7	
Storigan Mariter Rut, #1	
City Cleveland	
State Ohio ZIP Code + 4 44.1.25	11.b. Approximate dollar value of such dealing. \$0.
	12.a. Nature of interest held or income received.
	Attendance at educational seminar in 3/2004
	,
	12.b. Amount. \$4.03;

Name of Person Filing	A1	Mixon
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#### Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Legg Mason Wood Walker; Inc.	a. Labor Organization
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	b. Trust
Street 200 Public Sq.	c. Employer
Clby Cleveland	
State Ohio ZIP Code + 4 44114.	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Cleveland Bakers and Teamsters Pension Fund	401(k) administrator
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street 1870 E. 19th St.	
City Cleveland	
State Onio ZIP Code + 4 44114	11.b. Approximate dollar value of such dealing. \$0
	12.a. Nature of interest held or income received.
	Christmas party in 12/2004
	12.b. Amount. \$100

\$11905

Name o	of Person	Filing	ר מ	Mixon
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# Part B Continuation Page

	9. Business deals with:
8. Name and address of Business (including trade name, if any).	
Name Cleveland Bakers and Teamsters P, HW Funds	a. Labor Organization
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	j b. Trust
Street 1870 E. 19th St.	c. Employer
City Cleveland	
State Ohio ZIP Code + 4 44114	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Teamsters Local Union No. 507	Union trustee as a member of Teamsters Local Union No. 507
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street 5425 Warner Rd., #7	
City Cleveland	
State Ohio ZIP Code + 4 44125	11.b. Approximate dollar value of such dealing. \$0
	12.a. Nature of interest held or income received.
	Registration fee for 2005 educational seminar prepaid in 2004
	12.b. Amount. \$960
	12.b. Amount. \$960

Name of Person Filing Al Mixon	File Number U-	01685	
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# Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Cleveland Bakers and Teamsters P, HW Funds	`∑्रो a. Labor Organization
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust
Street 1870 E. 19th St.	c. Employer
City Cleveland	
State Ohio ZIP Code + 4 44114	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Teamsters Local Union No. 507	Union trustee as a member of Teamsters Local Union No. 507
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	-  -
Street 5425 Warner Rd., #7	
City Cleveland	
State Ohio ZIP Code + 4 441.25	11.b. Approximate dollar value of such dealing. \$0
	12.a. Nature of interest held or income received.
	'Attendance at International Foundation of Employee ! Benefit Plans' seminar in 11/2004
	}
	The second secon
	12.b. Amount. \$2,079

Name of Person Filing Al Mixon	File Number U- 01685
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#### Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Teamsters Local Union No. 507 CER Fund	N. J. a Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 5425 Warner Rd., #7	c. Employer	
City Cleveland		
State Ohio ZIP Code + 4 44125		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Teamsters Local Union No. 507	Participation as a member of Teams No. 507	ters Local Union
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street,5425 Warner Rd., #7		;
City Cleveland		į
State Ohio ZIP Code + 4 441.25	11.b. Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	
	Participation in Charitable, Educa Recreational activities with and or members of Teamsters Local Union No.	n behalf of
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		<b>!</b>
	12.b. Amount.	\$1,346